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| Fill in this information to identify your case: | |
|---|-------------------------------|
| United States Bankruptcy Court for the: | |
| Northern District of: Illinois (State) | |
| Case number (if known) | Chapter you are filing under: |
| | Chapter 7 |
| | Chapter 11 Chapter 12 |
| | Chapter 13 |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Part 1: Identify Yoursel | f | |
|---|----------------------------|---|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| Your full name | Charlene | |
| Write the name that is on | First name | First name |
| your government-issued picture identification (for | Middle name | Middle name |
| example, your driver's | Brown | |
| license or passport | Last name | Last name |
| Bring your picture identification to your meeting with the trustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. All other names you | | |
| have used in the last | First name | First name |
| 8 years | N. S. allalla va access | N. dalla mana |
| Include your married or | Middle name | Middle name |
| maiden names. | Last name | Last name |
| | First name | First name |
| | Middle name | Middle name |
| | Last name | Last name |
| 3. Only the last 4 digits of your Social | XXX - XX2275 | xxx - xx |
| Security number or federal Individual | OR | OR |
| Taxpayer Identification numbe | 9 xx - xx- | 9 xx - xx- |
| (ITIN) | | |

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| Brown Middle Name Last Name | Case number (if known) |
|--|--|
| About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| ✓ I have not used any business names or EINs. | I have not used any business names or EINs. |
| Business name | Business name |
| Business name | Business name |
| EIN | EIN |
| EIN | EIN |
| | If Debtor 2 lives at a different address: |
| 6806 S Union Ave Apt 1B Number Street | Number Street |
| Chicago Illinois 60621 City State Zip Code | City State Zip Code |
| Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| Number Street | Number Street |
| City State Zip Code | City State Zip Code |
| Check one: ✓ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. ✓ I have another reason. Explain. (See 28 U.S.C. §§ 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. §§ 1408.) |
| | About Debtor 1: I have not used any business names or EINs. Business name Business name EIN EIN 6806 S Union Ave Apt 1B Number Street Chicago Illinois 60621 City State Zip Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number Street City State Zip Code Check one: Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |

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| De | ebtor 1 Charlene | | | Case number (if kno | wn) |
|-----|---|--|---|---|--|
| | First Name | Middle Name | Last Name | | |
| Pa | rt 2: Tell the Court Abo | out Your Bankruptcy Case | | | |
| 7. | The chapter of the Bankruptcy Code you are choosing to file under | Check one. (For a brief description Bankruptcy (Form B2010)). Also, Chapter 7 Chapter 11 Chapter 12 Chapter 13 | | | C. § 342(b) for Individuals Filing for opriate box. |
| 8. | How you will pay the fee | more details about how you cashier's check, or money of may pay with a credit card of a line of the card of the ca | u may pay. Typically, if your decr If your attorney is or check with a pre-printe stallments. If you choose ing Fee in Installments (Ovaived (You may request red to, waive your fee, and tapplies to your family sidu must fill out the Application. | ou are paying the submitting your ed address. this option, sig official Form 103. this option only d may do so only ze and you are u | the clerk's office in your local court for e fee yourself, you may pay with cash, r payment on your behalf, your attorney in and attach the <i>Application for</i> A). If you are filing for Chapter 7. By law, a y if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official) |
| 9. | Have you filed for bankruptcy within the last 8 years? | Yes. District District District | When When When | MM / DD / YYYY MM / DD / YYYY MM / DD / YYYY | Case number Case number Case number |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | Ves. Debtor District Debtor District | When When | MM / DD / YYYY MM / DD / YYYY | Relationship to you Case number, if known Relationship to you Case number, if known |
| 11. | Do you rent your residence? | No. Go to line 12. | Statement About an Eviction | | you want to stay in your residence? St You (Form 101A) and file it with |

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Debtor 1 Charlene Brown __ Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have **V** No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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 Debtor 1 First Name
 Middle Name
 Brown
 Case number (if known)

 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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| Debtor 1 Charlene | Bro Bro | | ber (if known) |
|---|--|--|--|
| First Name | | t Name | |
| Part 6: Answer These Que | estions for Reporting Purposes | | |
| 16. What kind of debts do you have? | "incurred by an individual pr No. Go to line 16b. ✓ Yes. Go to line 17. 16b. Are your debts primarily but | rimarily for a personal, family, on the second seco | ts are debts that you incurred to obtain tion of the business or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | expenses are paid that fund No. | . Do you estimate that after any exds will be available to distribute to | |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999 | ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000 | 25,001-50,000 50,001-100,000 More than 100,000 |
| 19. How much do you estimate your assets to be worth? | | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 r | ion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion |
| 20. How much do you estimate your liabilities to be? Part 7: Sign Below | □ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 r | ion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion |
| Sign below | | | · |
| For you | correct. If I have chosen to file under Char of title 11, United States Code. It under Chapter 7. If no attorney represents me and I out this document, I have obtaine | pter 7, I am aware that I may prunderstand the relief available I did not pay or agree to pay so ad and read the notice required | |
| | I understand making a false stater connection with a bankruptcy cas both. 18 U.S.C. §§ 152, 1341, 15 | ment, concealing property, or one can result in fines up to \$25 | States Code, specified in this petition. Obtaining money or property by fraud in 0,000, or imprisonment for up to 20 years, or |
| | /s/ Charlene Brown Signature of Debtor 1 | <u></u> | gnature of Debtor 2 |
| | Executed on 1/10/2017 MM / DD / | E | xecuted on |

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| Debtor 1 Charlene | | Brown | Case number (if) | known) |
|--|---------------------------|--------------------------|-----------------------------|---|
| First Name | Middle Name | Last Name | | |
| For your attorney, if you are represented by one | eligibility to proceed un | der Chapter 7, 11, 12 | , or 13 of title 11, United | ave informed the debtor(s) about d States Code, and have explained the lso certify that I have delivered to the |
| If you are not | debtor(s) the notice requ | uired by 11 U.S.C. § 3 | 342(b) and, in a case in v | which § 707(b)(4)(D) applies, certify that I |
| represented by an | have no knowledge afte | r an inquiry that the ir | nformation in the sched | ules filed with the petition is incorrect. |
| attorney, you do not | • | | | |
| need to file this page. | /s/ Morsheda Hash | em | Date | 1/10/2017 |
| | Signature of Attorney | ···· | M | M / DD / YYYY |
| | | | | |
| | | | | |
| | Morsheda Hashem | | | |
| | Printed name | | | |
| | Semrad Law Firm | | | |
| | Firm name | | | |
| | 11101 S. Western Ave | enue | | |
| | Street | | | |
| | | | | |
| | | | | |
| | Chicago | | Illinois | 60643 |
| | City | | State | Zip Code |
| | | | | |
| | Contact phone | 3122374973 | Email address | mhashem@semradlaw.com |
| | | | _ | |
| | | | | |
| | Bar number | | State | |

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| Fill in this infor | mation to identify your ca | ase: | | |
|---------------------------|----------------------------|-------------|------------------------------|--|
| Debtor 1 | Charlene | | Brown | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case number (If known) | | | (Gtate) | |

| | Check if | this | is | an |
|---|----------|---------|----|----|
| _ | amende | d filii | ng | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| | Your assets Value of what you own |
|---|---|
| 1. Schedule A/B: Property (Official Form 106A/B) | 40.00 |
| 1a. Copy line 55, Total real estate, from Schedule A/B | \$0.00 |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$9,921.00 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$9,921.00 |
| Part 2: Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) | \$16,565.00 |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule | D \$\frac{\psi 10,003.00}{2}\$ |
| | |
| · · · · · · · · · · · · · · · · · · · | \$0.00 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0.00 |
| · | \$37,451.58 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$37,451.58 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> | \$37,451.58 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> | \$37,451.58 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$37,451.58 \$54,016.58 |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$37,451.58 \$54,016.58 |

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Debtor 1 Charlene Brown Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$1,425.67 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

9g. Total. Add lines 9a through 9f.

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| Fill in this i | nformation t | to identify your c | ase: | | | | | | |
|--|---|---|--|-----------------------|---|------------------------------|--------------------|---|--|
| Debtor 1 | Charle | ne | | | Brown | | | | |
| Debtor 1 | First N | | Middle N | lame | Last Name | | | | |
| Debtor 2 (Spouse, if fili | ng) First N | lame | Middle N | lame | Last Name | | | | |
| United Stat | tes Bankrupt | cy Court for the: | Northern | | District of Illinois | | | | |
| Case numl | ber | | | | (State) | | | | |
| , , | l Form | 106A/B | | | | | | | Check if this is an amended filing |
| | | B: Prope | rtv | | | | | | 12/1 |
| In each cat category w responsible write your | tegory, sepa here you the for supplying name and c | arately list and d link it fits best. E ling correct infor ease number (if k | lescribe items. Li Be as complete a mation. If more s nown). Answer e | nd ac pace very | asset only once. If an asse curate as possible. If two r is needed, attach a separa question. r Other Real Estate You | married peop ate sheet to | ple are this fo | filing together, both a rm. On the top of any a | are equally |
| | | | • | | | | | | |
| ✓ | No. Go to P | | quitable interest | | residence, building, land, | · | roperty | | claims or exemptions. Put |
| 1.1 | Street addres | ss, if available, or | other description | | at is the property? Check all Single-family home Duplex or multi-unit building | | | the amount of any secu Creditors Who Have Cla | red claims on Schedule D: aims Secured by Property. |
| | | | | | Condominium or cooperative Manufactured or mobile hom | | | Current value of the entire property? | Current value of the portion you own? |
| | Number | Street | Zip Code | | Land Investment property Timeshare Other | | | Describe the nature of interest (such as fee sthe entireties, or a life | simple, tenancy by |
| | , | | | Who one | o has an interest in the pro | perty? Check | :k | Check if this is co (see instructions) | ommunity property |
| | | | | | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | | | |
| | | | | | At least one of the debtors ar er information you wish to perty identification number | add about t | his itei | m, such as local | |
| 1.2 | | more than one, li | | Wha | at is the property? Check all Single-family home | I that apply. | | the amount of any secu | claims or exemptions. Put used claims on Schedule D: name Secured by Property. |
| | | ss, ii avaliable, or | outer description | | Duplex or multi-unit building Condominium or cooperative Manufactured or mobile hom | Э | | Current value of the entire property? | Current value of the portion you own? |
| | Number | Street | Zip Code | Ħ | Land Investment property Timeshare Other | | | Describe the nature of interest (such as fee sthe entireties, or a life | simple, tenancy by |
| | • | | | one | | perty? Chec | k | Check if this is co (see instructions) | ommunity property |
| | | | | 님 | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | | | | |
| | | | | Oth | At least one of the debtors ar er information you wish to | | his ite | m, such as local | |
| | | | | | perty identification number | | | , | |

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| Debtor 1 | Charlene First Name | Middle Name | Brown Last Name | Case number | (if known) | |
|-----------|---|--------------------------|---|-------------------|--|---|
| 1.3 | et address, if available, or oth | \ | What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home | t apply. | the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D: ims Secured by Property.</i> Current value of the portion you own? |
| Nun | nber Street State | Zip Code | Land Investment property Timeshare Other Who has an interest in the propert | v? Check one. | Describe the nature or interest (such as fee s the entireties, or a life Check if this is co (see instructions) | imple, tenancy by e estate), if known. |
| | | [[[| Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and ar Other information you wish to add property identification number: | nother | | |
| | the dollar value of the por ve attached for Part 1. Wri | te that number h | . | luding any entrie | s for pages | |
| Do you ow | | equitable interest | in any vehicles, whether they are | - | - | |
| | ns, trucks, tractors, sport uti | | also report it on Schedule G: Execute cycles | ory Contracts and | Unexpired Leases. | |
| 3.1 | Make Model: Year: | Nissan Altima 2007 | Who has an interest in the proone. Debtor 1 only | pperty? Check | the amount of any secu | claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property. |
| | Approximate mileage: Other information: 2007 Nissan Altima: REAFF | 17000 | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is community | | Current value of the entire property? \$5137.00 | Current value of the portion you own? \$5137.00 |
| 3.2 | Make Model: Year: | | who has an interest in the proone. Debtor 1 only | operty? Check | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. |
| | Approximate mileage: Other information: | | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is community instructions) | | Current value of the entire property? | Current value of the portion you own? |

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| 0.0 | Charlene First Name | Middle Name | Brown Last Name | Case number | SI (II KIIOWIY | |
|-------------------|---|-------------|--|--|---|---|
| | First Name | Middle Name | | | | |
| 3.3 | Make | - | Who has an interest in the pro | perty? Check | Do not deduct secured | • |
| | Model: Year: | | one. | | the amount of any secu | ned claims on <i>Scriedule</i> aims Secured by Propert |
| | Approximate mileage: | | Debtor 1 only | | oroditoro virio riavo ola | anno occured by Propert |
| | Approximate imicage. | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 only | | entire property? | portion you own? |
| | | | At least one of the debtors ar | nd another | · | |
| | | | Check if this is community | property (see | | |
| | | | instructions) | | | |
| 3.4 | Make | | Who has an interest in the pro | perty? Check | Do not deduct secured | claims or exemptions. F |
| | Model: | | one. | | the amount of any secu | |
| | Year: | | Debtor 1 only | | Creditors Who Have Cla | nims Secured by Propert |
| | Approximate mileage: | | Debtor 2 only | | Current value of the | Current value of the |
| | Other information: | | Debtor 1 and Debtor 2 only | | entire property? | portion you own? |
| | | | At least one of the debtors ar | nd another | | |
| | | | Check if this is community | property (see | | |
| | | | | | | |
| | | | instructions) er recreational vehicles, other verit, fishing vessels, snowmobiles, mot | | | |
| Exa | mples: Boats, trailers, motors No Yes | | instructions) er recreational vehicles, other ve | torcycle accessori | | • |
| Example Example 1 | mples: Boats, trailers, motors No Yes Make | | instructions) er recreational vehicles, other ve t, fishing vessels, snowmobiles, mot Who has an interest in the pro | torcycle accessori | Do not deduct secured the amount of any secu | • |
| Example Example 1 | mples: Boats, trailers, motors No Yes Make Model: | | instructions) er recreational vehicles, other ve it, fishing vessels, snowmobiles, mot Who has an interest in the pro one. | torcycle accessori | Do not deduct secured the amount of any secu | red claims on <i>Schedule</i> |
| Example Example 1 | mples: Boats, trailers, motors No Yes Make Model: Year: | | instructions) er recreational vehicles, other ve it, fishing vessels, snowmobiles, mot Who has an interest in the pro one. Debtor 1 only | torcycle accessori | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Propert |
| Example Example 1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | | who has an interest in the proone. Debtor 1 only Debtor 2 only | torcycle accessori | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule nims Secured by Propert Current value of the |
| Example Example 1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | | instructions) er recreational vehicles, other verit, fishing vessels, snowmobiles, motors Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar | torcycle accessori perty? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule nims Secured by Propert Current value of the |
| Example Example 1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | | who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 2 only | torcycle accessori perty? Check | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule nims Secured by Propert Current value of the |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: | | who has an interest in the proone. Debtor 1 only Debtor 2 only At least one of the debtors ar Check if this is community | perty? Check nd another property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla | red claims on Schedule ims Secured by Propert Current value of the portion you own? |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: | | instructions) er recreational vehicles, other verit, fishing vessels, snowmobiles, motors Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is community instructions) | perty? Check nd another property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | | instructions) er recreational vehicles, other verit, fishing vessels, snowmobiles, motor one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors are Check if this is community instructions) Who has an interest in the pro | perty? Check nd another property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. F |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: | | instructions) er recreational vehicles, other verit, fishing vessels, snowmobiles, motor one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors are Check if this is community instructions) Who has an interest in the proone. | perty? Check nd another property (see | Do not deduct secured the amount of any secu Creditors Who Have Cla Current value of the entire property? Do not deduct secured the amount of any secu | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: | | instructions) er recreational vehicles, other verit, fishing vessels, snowmobiles, motion one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors are check if this is community instructions) Who has an interest in the proone. Debtor 1 only | perty? Check nd another property (see | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classifications | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. Fired claims on Schedule hims Secured by Propert |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | | instructions) er recreational vehicles, other verit, fishing vessels, snowmobiles, motor it, fishing vessels, snowmobiles, snowmobiles, motor it, fishing vessels, snowmobiles, snowmobiles, snowmobiles, snowmobiles, snowmobiles, snowmobiles, snow | perty? Check and another property (see perty? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule hims Secured by Propert Current value of the |
| 4.1 | mples: Boats, trailers, motors No Yes Make Model: Year: Approximate mileage: Other information: Make Model: Year: Approximate mileage: | | instructions) er recreational vehicles, other verit, fishing vessels, snowmobiles, motor it, fishing vessels, snowmobiles, snowmobiles, snowmobiles, snowmobiles, snowmobiles, snowmobiles, snowmobiles, snow | perty? Check and another property (see perty? Check | Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the entire property? Do not deduct secured the amount of any secu Creditors Who Have Classification Current value of the | red claims on Schedule hims Secured by Propert Current value of the portion you own? claims or exemptions. For the claims on Schedule hims Secured by Propert Current value of the |

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Debtor 1 Charlene Brown Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Misc. Household Goods and Furniture \$350.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... Misc. Electronics \$200.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothing** \$225.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$775.00 for Part 3. Write that number here

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Debtor 1 Charlene Brown Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes \$25.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: \$15.00 17.1. Checking account: Chase 17.2. Checking account: 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts **✓** No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

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| Debt | tor 1 Charlene | | Brown | Case number (if known) | |
|------|--|--|----------------------------|---|------------|
| | First Name | Middle Name | Last Name | · , | |
| 20. | Negotiable instruments | orate bonds and other negotial include personal checks, cashiers' ents are those you cannot transfer Issuer name: | checks, promissory no | tes, and money orders. | |
| | | | | | |
| 21. | Retirement or pension Examples: Interests in If | | . thrift savings accounts | s, or other pension or profit-sharing plans | |
| | No No | " " = " " " " " " " " " " " " " " " " " | , anni caringo account | , or early parities or promormating plane | |
| | Yes. List each | Type of account: | Institution name: | | |
| | account | 401(k) or similar plan: | | | |
| | separately. | Pension plan: | | | |
| | | | | | |
| | | IRA: | | | |
| | | Retirement account: | - | | |
| | | Keogh: | | | |
| | | Additional account: | | | |
| | | Additional account: | | | |
| 22. | | prepayments d deposits you have made so that with landlords, prepaid rent, public | | | |
| | Yes | Electric: | | | |
| | | Gas: | | | |
| | | Heating oil: | | | |
| | | Security deposit on rental unit: | | | |
| | | Prepaid rent: | _ | | |
| | | Telephone: | | | |
| | | Water: | | | . <u> </u> |
| | | Rented furniture: | | | |
| | | Other: | | | |
| 23. | Annuities (A contract fo | or a periodic payment of money to | you, either for life or fo | r a number of years) | |
| | ✓ No Yes | Issuer name and description: | | | |
| | | | | | |
| | | | | · | |
| | | | | | |

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| Debt | or 1 Charlene First Name | Middle | | iber (if known) | |
|------|------------------------------|--|--|--------------------------|---|
| 24. | Interests in a | n education IRA, in an acc | count in a qualified ABLE program, or under a qualified | state tuition program. | |
| | _ | 530(b)(1), 529A(b), and 529 | (b)(1). | | |
| | ✓ No Yes | Institution name and descri | ption. Separately file the records of any interests.11 U.S.C. § | § 521(c): | |
| | | _ | | | |
| | | | | | |
| 25. | | able or future interests in propertion in propertion in propertion in the contract of the cont | property (other than anything listed in line 1), and right | s or powers | |
| | ✓ No Yes. Desc | cribe | | | |
| 26. | | | secrets, and other intellectual property es, proceeds from royalties and licensing agreements | | |
| | ✓ No Yes. Desc | oribe | | | |
| | | | | | |
| 27. | | nchises, and other genera ilding permits, exclusive licen | I intangibles ses, cooperative association holdings, liquor licenses, profe | essional licenses | |
| | ✓ No Yes. Desc | oribe | | | 1 |
| | 163. 2630 | J. 150 | | | |
| Mor | nev or prope | rty owed to you? | | | Current value of the |
| | ioy e. pi epe | y onou io you | | | portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refunds o | wed to you | | | |
| | No | | | | ***** |
| | abou | specific information It them, including whether | 2016 Anticipated Tax Refund: Earned Income Credit 2016 Anticipated Tax Refund | Federal: | \$3969.00 |
| | - | already filed the returns the tax years | | State: | \$0.00 |
| | | | | Local: | \$0.00 |
| 29. | Family support Examples: Pas | | spousal support, child support, maintenance, divorce settle | ment, property settlemer | nt |
| | ✓ No | | | 7 Al- | Φ0.00 |
| | Yes. Give | specific information | | Alimony: | \$0.00 |
| | | | | Maintenance: | \$0.00 |
| | | | | Support: | \$0.00 |
| | | | | Divorce settlement: | \$0.00 |
| 30. | Other amount | ts someone owes you | | Property settlement: | \$0.00 |
| | Examples: Unp | paid wages, disability insuran | ce payments, disability benefits, sick pay, vacation pay, wor oans you made to someone else | kers' compensation, | |
| | ✓ No Yes. Descri | ihe | | | 1 |
| | L 103. De301 | | | | |
| | | | | | |

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| Deb | tor 1 Charlene | | Brown | Case number (if known) | |
|------|---|----------------------------|--|--|---|
| | First Name | Middle Name | Last Name | | |
| 31. | Interests in insurance police Examples: Health, disability, | | savings account (HSA); credit, h | nomeowner's, or renter's insurance | |
| | No Yes. Name the insurance of each policy and list it | e company | ompany name: | Beneficiary: | Surrender or refund value: |
| 32. | Any interest in property the If you are the beneficiary of a property because someone No Yes. Describe | a living trust, expect pro | | y, or are currently entitled to receive | |
| 33. | | | u have filed a lawsuit or made nce claims, or rights to sue | a demand for payment | |
| 34. | Other contingent and unlito set off claims No Yes. Describe | quidated claims of ev | ery nature, including counterd | claims of the debtor and rights | |
| 35. | Any financial assets you d No Yes. Describe | id not already list | | | |
| 36. | | - | Part 4, including any entries fo | | \$4009.00 |
| Part | | | - | nterest In. List any real estate in Part | 1. |
| 37. | No. Go to Part 6. Yes. Go to line 38. | gal or equitable inter | est in any business-related pr | С р D | urrent value of the ortion you own? o not deduct secured claims rexemptions |
| 38. | Accounts receivable or co | ommissions you alrea | dy earned | · · | exemptions |
| | Yes. Describe | | | | |
| 39. | | | nodems, printers, copiers, fax ma | achines, rugs, telephones, desks, chairs, electi | ronic devices |
| | Yes. Describe | | | | |
| | | | | | |

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| Deb | tor 1 Charlene | Brown | Case number (if known) | |
|--------|--|--|----------------------------|------------------------------|
| | First Name | Middle Name Last Name | | |
| 40. | Machinery, fixtures, equ | uipment, supplies you use in business, and tools of your trade | • | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | _ | | | |
| | | | | |
| 41. | Inventory | | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |
| | | | | |
| 42. | Interests in partnership | s or joint ventures | | |
| | ✓ No | | | |
| | Yes. Give specific | Name of entity: | % of ownership: | |
| | information about | | | |
| | them | | | |
| | | | | <u> </u> |
| | | | | |
| 43. | Customer lists, mailing li | ists, or other compilations | | |
| | No No | | | |
| | <u> </u> | clude personally identifiable information (as defined in 11 U.S.C. § | 101/410))2 | |
| | Tes. Do your lists into | adde personally identifiable information (as defined in 11 0.3.0. g | 101(4174)): | |
| | No | | | |
| | Yes. Describ | De | | |
| | | | | |
| 44. | Any business-related pr | roperty you did not already list | | |
| | ✓ No | | | |
| | Yes. Give specific | | | _ |
| | information | | | <u> </u> |
| | | | | |
| | | | | _ |
| | | | | <u> </u> |
| | | | | |
| | | | | |
| | | | | _ - |
| | | | | |
| | | of your entries from Part 5, including any entries for pages y | | |
| for Pa | art 5. Write that number | here | | |
| Part | Beautibe Any Far | m- and Commercial Fishing-Related Property You O | wn or Have an Interest In. | |
| rait | If you own or have an ir | nterest in farmland, list it in Part 1. | | |
| 46. | Do you own or have any | y legal or equitable interest in any farm- or commercial fishin | ng-related property? | |
| | | , | | Current value of the |
| | No. Go to Part 7. | | | portion you own? |
| | Yes. Go to line 47. | | | Do not deduct secured claims |
| 47 | Farm animals | | | or exemptions |
| 47. | Farm animals Examples: Livestock, pour | ultry, farm-raised fish | | |
| | <u> </u> | , | | |
| | ✓ No | | | |
| | Yes. Describe | | | |
| | | | | |

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| Debto | or 1 Charlene First Name | Middle Name | Brown Last Name | Case number (if known) | |
|---------------|--------------------------|--|---------------------|------------------------------|-------------|
| 48. | | wing or harvested | <u> </u> | | |
| | ✓ No | | | | |
| | Yes. Describe |) | | | |
| | | | | | |
| 49. | Farm and fishing | g equipment, implements, machinery, fixt | ures, and tools of | trade | |
| | ✓ No | | | | |
| | Yes. Describe |) | | | |
| 50 | Earm and fishing | g supplies, chemicals, and feed | | | |
| 30. | No | g supplies, chemicals, and leed | | | |
| | Yes. Describe |) | | | |
| | _ | | | | |
| 51. | Any farm- and c | ommercial fishing-related property you d | id not already list | | |
| | ✓ No | | | | |
| | Yes. Describe | ··· | | | |
| | | | | | |
| | | e of all of your entries from Part 6, includ | | | |
| or Pai | rt 6. Write that n | umber here | | | |
| | | | | | |
| Part 7 | Dosoribo A | Il Property You Own or Have an Inte | roct in That Vo | u Did Not List Abovo | |
| | | er property of any kind you did not alread | | u Did Not List Above | |
| | _ | n tickets, country club membership | | | |
| | ✓ No Yes. Give spe | poific | | | |
| | information | Some | | | |
| | | | | | |
| F4 A.I | uluba dalla a al- | and all of the second day from Bod 7. William | that a subarabass | | |
| 54. Ad | id the dollar valu | e of all of your entries from Part 7. Write | that number nere | 3 | |
| | | | | | |
| | | | | | |
| | | | | | |
| Part 8 | List the Tot | als of Each Part of this Form | | | |
| 55. P | art 1: Total real | estate, line 2 | | > | |
| 56 n | art 2 total vehicl | os lino 5 | | | |
| | | onal and household items, line 15 | \$5137.00 | | |
| | - | cial assets, line 36 | \$775.00 | | |
| | | ness-related property, line 45 | \$4009.00 | | |
| | | | - | | |
| | | - and fishing-related property, line 52 r property not listed, line 54 | | | |
| | | pperty. Add lines 56 through 61 | | | |
| 02.1 | otai personai pro | porty. Add iiiles so tillough on | \$9921.00 | Copy personal property total | + \$9921.00 |
| | | | | | \$9921.00 |
| 63. Tc | tal of all proper | ty on Schedule A/B. Add line 55 + line 62 | | | |

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| Fill in this infor | mation to identify your ca | ase: | | |
|---------------------------|----------------------------|-------------|------------------------------|--|
| Debtor 1 | Charlene | | Brown | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case number (If known) | | | (Glato) | |

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Pa | Identify the Property You Clair | n as Exempt | | |
|----|---|---|---|------------------------------------|
| 1. | Which set of exemptions are you claim | ing? Check one only, ev | ven if your spouse is filing with you. | |
| | You are claiming state and federal | nonbankruptcy exemp | otions. 11 U.S.C. § 522(b)(3) | |
| | You are claiming federal exemption | ns. 11 U.S.C. § 522(b)(2 | 2) | |
| 2. | For any property you list on Schedule A | /B that you claim as e | exempt, fill in the information below. | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own Copy the value from Schedule A/B | Amount of the exemption you claim Check only one box for each exemption. | Specific laws that allow exemption |
| | Brief description: Misc. Household Goods and Furniture Line from Schedule A/B: 06 | \$350.00 | \$350.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| | Brief description: Misc. Electronics Line from Schedule A/B: 07 | \$200.00 | \$200.00 100% of fair market value, up to any applicable statutory limit | 735 ILCS 5/12-1001(b) |
| 3. | ✓ No | ery 3 years after that for | 375? cases filed on or after the date of adjustment.) within 1,215 days before you filed this case? | |

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Debtor 1 Charlene Brown Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property Check only one box for each exemption. own Copy the value from Schedule A/B 735 ILCS 5/12-1001(a) Brief \$225.00 description: **✓** \$225.00 **Used Clothing** 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 735 ILCS 5/12-1001(b) Brief \$25.00 description: **✓** \$25.00 Cash on Hand 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 16 735 ILCS 5/12-1001(g)(1) Brief \$3,359.00 description: **✓** \$3,359.00 Federal, 2016 100% of fair market value, up to any **Anticipated Tax Refund: Earned Income Credit** applicable statutory limit Line from Schedule A/B: 28 735 ILCS 5/12-1001(b) Brief \$610.00 description: \$610.00 Federal, 2016 100% of fair market value, up to any **Anticipated Tax Refund** applicable statutory limit Line from Schedule A/B: 28 Brief 735 ILCS 5/12-1001(b) \$15.00 description: \$15.00 Checking account, 100% of fair market value, up to any Chase applicable statutory limit Line from Schedule A/B: 735 ILCS 5/12-1001(c); 735 ILCS Brief \$5,137.00 5/12-1001(b) description: Nissan Altima, 2007, 100% of fair market value, up to any 2007 Nissan Altima:

applicable statutory limit

REAFFIRM

Line from Schedule A/B:

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| | | DC | cument Page 22 or | 09 | | |
|---|--|---|--|---|---|------------------------------------|
| Fill in this info | rmation to identify your ca | se: | | | | |
| Debtor 1 | Charlene | | Brown | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States | Bankruptcy Court for the: | Northern | District of Illinois | | | |
| Case number | | | (State) | | | |
| Official | Form 106D | | | J | | Check if this is an amended filing |
| Sched | ule D: Credite | ors Who Ha | ve Claims Secure | ed by Prop | ertv | 12/15 |
| 1. Do any No. | se number (if known). creditors have claims se | ecured by your proper | nber the entries, and attach it to t ty? with your other schedules. You have | · | | es, write your |
| List all separate | I secured claims. If a credit ely for each claim. If more the | nan one creditor has a par | cured claim, list the creditor ticular claim, list the other creditors order according to the creditor's | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| Creditor 4020 I Num PHOEF City Who o' De De At an | ber Street | 2007 Nissan Altima: RE As of the date you file Contingent Unliquidated Disputed Nature of lien. Check | e, the claim is: Check all that apply. all that apply. made (such as mortgage or secured as tax lien, mechanic's lien) a lawsuit | \$16,565.00 | \$5,137.00 | \$11,428. <u>0</u> 0 |
| Date d | lebt was 10/1/2016 ed | Last 4 digits of accou | nt number8001 | | | |

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$16,565.00

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| Fill | in this inforr | mation to identify your c | ase: | | | | | |
|--------------------------------|--|--|--|---|--|--|--|--|
| Deb | otor 1 | Charlene | | Brown | | | | |
| | | First Name | Middle Name | Last Name | | | | |
| | otor 2 | | | | | | | |
| (Spc | use, if filing) | First Name | Middle Name | Last Name | | | | |
| Uni | ted States B | ankruptcy Court for the: | Northern | District of Illinois | | | | |
| 0 | | | | (State) | | | | |
| (If kn | se number lown) | | | | | | | |
| Of | ficial Fo | orm 106E/F | | | | Che | ck if this is an | amended filing |
| | | | | | | _ | | |
| Sc | chedu | ıle E/F: Cre | editors Who | Have Unse | cured Claims | | | 12/15 |
| othe Forn clair the c | er party to a n 106A/B) a ns that are entries in tl wn). | any executory contracts and on <i>Schedule G: Exe</i> listed in <i>Schedule D: C</i> he boxes on the left. At | s or unexpired leases that cutory Contracts and Une creditors Who Hold Claims tach the Continuation Pag | could result in a claim xpired Leases (Official Secured by Property. I | ns and Part 2 for creditors wi . Also list executory contract Form 106G). Do not include a f more space is needed, copy top of any additional pages, | s on <i>Schedu</i> any creditors the Part yo | le A/B: Prope s with partial u need, fill it | erty (Official lly secured out, number |
| Par | t 1: List / | All of Your PRIORITY | Y Unsecured Claims | | | | | |
| 1. | Do any cr | editors have priority un | secured claims against yo | ou? | | | | |
| | ✓ No. G | Go to Part 2. | | | | | | |
| | Yes. | | | | | | | |
| 2. | listed, iden As much a Continuati | ntify what type of claim it as possible, list the claims on Page of Part 1. If mor | is. If a claim has both priority | y and nonpriority amount ling to the creditor's nam particular claim, list the ot | | both priority riority unsecu | and nonprior | ity amounts. |
| 1 | | | | | | Tatal | Duianitu | Mannuiauitu |

claim

amount

amount

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Debtor 1 Charlene Brown Case number (if known) First Name Middle Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 CCI \$965.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 9/1/2015 501 Greene Street # 302 Number Street As of the date you file, the claim is: Check all that apply. Contingent 30901 Georgia Augusta Unliquidated City Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: 10 **✓** No Other. Specify PEOPLES GAS LIGHT AND COKE Yes 4.2 ComEd \$530.11 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 3 Lincoln Center Street Number As of the date you file, the claim is: Check all that apply. Bankruptcy Section Contingent Unliquidated 60181 Oakbrook Terrace Illinois Zip Code Disputed City State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify Electric Bills Is the claim subject to offset? **✓** No Yes Elite Rentals Chicago LLC \$23,275.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Po Box 208661 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60620 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **|** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Back Rent to Landlord Is the claim subject to offset? **✓** No Yes

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Brown Debtor 1 Charlene Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page Total claim After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

| 4.4 | First National Collection Bureau, Inc | - Last 4 digits of account number 1880 — | \$700.00 |
|-----|--|---|----------|
| | Nonpriority Creditor's Name 610 Waltham Way | When was the debt incurred? n/a | |
| | Number Street | <u></u> | |
| | | As of the date you file, the claim is: Check all that apply. - Contingent | |
| | | i i | |
| | Sparks Nevada 89434 | Unliquidated | |
| | City State Zip Code | Disputed | |
| | Who incurred the debt? Check one. Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | |
| | 님 | debts | |
| | Check if this claim relates to a community debt | Other. Specify Credit Card Bill | |
| | Is the claim subject to offset? | | |
| | ✓ No | | |
| | Yes | | |
| 4.5 | FIRST PREMIER BANK | - Last 4 digits of account number | \$548.00 |
| | Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 | When was the debt incurred? 4/1/2014 | |
| | Number Street | A colling data on Clarific and the Charles Wheel and | |
| | c/o Kelly Lukason | As of the date you file, the claim is: Check all that apply. Contingent | |
| | Saint Cloud Minnesota 56302 | | |
| | City State Zip Code | Unliquidated | |
| | Who incurred the debt? Check one. Debtor 1 only | Disputed | |
| | | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | |
| | Check if this claim relates to a community debt | debts | |
| | Is the claim subject to offset? | ✓ Other. Specify CreditCard | |
| | ✓ No | _ | |
| | Yes | | |
| 4.6 | FST PREMIER | | \$512.00 |
| 7.0 | Nonpriority Creditor's Name | - Last 4 digits of account number 1523 | Ψ012.00 |
| | 3820 N LOUISE AVE Number Street | When was the debt incurred? 2/1/2013 | |
| | Number Street | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | SIOUX FALLS South Dakota 57107 City State Zip Code | - Unliquidated | |
| | Who incurred the debt? Check one. | Disputed | |
| | Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 2 only | Student loans | |
| | Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| | At least one of the debtors and another | divorce that you did not report as priority claims | |
| | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar | |
| | Is the claim subject to offset? | debts Other. Specify CreditCard | |
| | No | Uther: Specify CreditCard | |
| | | | |

Yes

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Debtor 1 Charlene Brown _ Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** Genesis Financial & Payment Systems Illinois, LLC 4.7 \$703.47 Last 4 digits of account number Nonpriority Creditor's Name 3175 Commercial Ave. Suite 201 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60062 Northbrook Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar 4.8 4.9

| Check if this claim relates to a community debt | Other. Specify Payday Loan | |
|---|---|---------|
| Is the claim subject to offset? | <u> </u> | |
| ✓ No | | |
| Yes | | |
| GREATLAKESF | — Last 4 digits of account number 0330\$3 | ,424.00 |
| Nonpriority Creditor's Name | | |
| Po Box 13489 Number Street | When was the debt incurred? 2/1/2016 | |
| Trained Street | As of the date you file, the claim is: Check all that apply. | |
| | Contingent | |
| Chicago Illinois 60613 City State Zip Code | — Unliquidated | |
| Who incurred the debt? Check one. | Disputed | |
| Debtor 1 only | Type of NONPRIORITY unsecured claim: | |
| Debtor 2 only | Student loans | |
| Debtor 1 and Debtor 2 only | Obligations arising out of a separation agreement or | |
| At least one of the debtors and another | divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | |
| Check if this claim relates to a community debt | debts | |
| Is the claim subject to offset? | Other. Specify 21 Automobile | |
| ✓ No | | |
| | | |
| Yes | | |
| Homes Renewal LLC | — Last 4 digits of account number \$2 | ,525.00 |
| Homes Renewal LLC Nonpriority Creditor's Name | | ,525.00 |
| Homes Renewal LLC | Last 4 digits of account number\$2 When was the debt incurred?n/a | ,525.00 |
| Homes Renewal LLC Nonpriority Creditor's Name 122 S MICHIGAN #1220 | | ,525.00 |
| Homes Renewal LLC Nonpriority Creditor's Name 122 S MICHIGAN #1220 | When was the debt incurred?n/a | ,525.00 |
| Homes Renewal LLC Nonpriority Creditor's Name 122 S MICHIGAN #1220 Number Street | When was the debt incurred? | ,525.00 |
| Homes Renewal LLC Nonpriority Creditor's Name 122 S MICHIGAN #1220 | When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent | ,525.00 |
| Homes Renewal LLC Nonpriority Creditor's Name 122 S MICHIGAN #1220 Number Street Chicago Illinois 60603 City State Zip Code Who incurred the debt? Check one. | When was the debt incurred? | ,525.00 |
| Homes Renewal LLC Nonpriority Creditor's Name 122 S MICHIGAN #1220 Number Street Chicago Illinois 60603 City State Zip Code Who incurred the debt? Check one. Debtor 1 only | When was the debt incurred? | ,525.00 |
| Homes Renewal LLC Nonpriority Creditor's Name 122 S MICHIGAN #1220 Number Street Chicago Illinois 60603 City State Zip Code Who incurred the debt? Check one. | When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or | ,525.00 |
| Homes Renewal LLC Nonpriority Creditor's Name 122 S MICHIGAN #1220 Number Street Chicago Illinois 60603 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only | When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar | ,525.00 |
| Homes Renewal LLC Nonpriority Creditor's Name 122 S MICHIGAN #1220 Number Street Chicago Illinois 60603 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only | When was the debt incurred? | ,525.00 |
| Homes Renewal LLC Nonpriority Creditor's Name 122 S MICHIGAN #1220 Number Street Chicago Illinois 60603 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another | When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | ,525.00 |
| Homes Renewal LLC Nonpriority Creditor's Name 122 S MICHIGAN #1220 Number Street Chicago Illinois 60603 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt | When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | ,525.00 |
| Homes Renewal LLC Nonpriority Creditor's Name 122 S MICHIGAN #1220 Number Street Chicago Illinois 60603 City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? | When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | ,525.00 |

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Debtor 1 Charlene Brown Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 iSpeedy Loan \$2,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2850 Belvidere Rd Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60085 Waukegan Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ___ Payday Loan Is the claim subject to offset? **✓** No Yes Majestic Lake Financial Inc \$400.00 4.11 7742 Last 4 digits of account number ___ Nonpriority Creditor's Name 635 East Highway 20 # K When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Upper Lake California 95485 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Payday Loan Is the claim subject to offset? **✓** No Yes Money Messiah 4.12 \$825.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 1469 n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Kahnawake State Zip Code City Disputed Type of NONPRIORITY unsecured claim: USA Student loans Country Who incurred the debt? Check one. Obligations arising out of a separation agreement or Debtor 1 only divorce that you did not report as priority claims Debtor 2 only Debts to pension or profit-sharing plans, and other similar debts Debtor 1 and Debtor 2 only Other. Specify ___ Payday Loan At least one of the debtors and another Check if this claim relates to a community debt Is the claim subject to offset? **✓** No

Yes

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Debtor 1 Charlene Brown Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 Northcash - Northstar Finance LLC \$480.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Po Box 498 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 59527 Hays Montana City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ___ Payday Loan Is the claim subject to offset? **✓** No Yes TRIDENT ASSET MANAGEMENT 4.14 \$160.00 2930 Last 4 digits of account number ___ Nonpriority Creditor's Name 3/1/2013 53 PERIMETER CTR E STE 4 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent ATLANTA 30346 Georgia Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 UnknownLoanType Other. Specify Is the claim subject to offset? **✓** No Yes 4.15 Village Green \$404.00 Last 4 digits of account number Nonpriority Creditor's Name 860 N Dewitt Pl When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60611 Chicago Illinois Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ____ Due Is the claim subject to offset? **✓** No

Yes

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Debtor 1 Charlene Brown Case number (if known)
First Name Middle Name Last Name

| ASH ANOS FREEDMAN Name 77 W Washington St Ste Number Street Chicago City USA Webcash Name USBA Webcash Number Street Chicago City LVNV FUNDING LLC Name PO BOX 740281 Number Street HOUSTON City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | | 60602 Zip Code 60610 Zip Code | Line 4.3 Last 4 digits of a On which entry in Line 4.7 Last 4 digits of a | of (Check one): ccount number Part 1 or Part of (Check one): ccount number | 2 did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims 2 did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims □ 5000 2 did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured |
|--|---------------------------------------|--|---|---|---|
| Number Street Chicago City USA Webcash Name USBA Webcash Number Street Chicago City LVNV FUNDING LLC Name PO BOX 740281 Number Street HOUSTON City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | Illinois State Illinois State Texas | Zip Code 60610 Zip Code | Last 4 digits of a On which entry in Line 4.7 Last 4 digits of a On which entry in | one): ccount number Part 1 or Part of (Check one): ccount number Part 1 or Part of (Check | Part 2: Creditors with Nonpriority Unsecured Claims 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 5000 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| Number Street Chicago City USA Webcash Name USBA Webcash Number Street Chicago City LVNV FUNDING LLC Name PO BOX 740281 Number Street HOUSTON City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | Illinois State Illinois State Texas | Zip Code 60610 Zip Code | Last 4 digits of a On which entry in Line 4.7 Last 4 digits of a On which entry in | one): ccount number Part 1 or Part of (Check one): ccount number Part 1 or Part of (Check | Part 2: Creditors with Nonpriority Unsecured Claims 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 5000 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| City USA Webcash Name USBA Webcash Number Street Chicago City LVNV FUNDING LLC Name PO BOX 740281 Number Street HOUSTON City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | Illinois State | Zip Code 60610 Zip Code | On which entry in Line 4.7 Last 4 digits of a On which entry in | of (Check one): ccount number Part 1 or Part p Part 1 or Part of (Check | Claims 2 did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured Claims □ 5000 2 did you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims □ Part 2: Creditors with Nonpriority Unsecured |
| City USA Webcash Name USBA Webcash Number Street Chicago City LVNV FUNDING LLC Name PO BOX 740281 Number Street HOUSTON City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | Illinois State | Zip Code 60610 Zip Code | On which entry in Line 4.7 Last 4 digits of a On which entry in | of (Check one): ccount number Part 1 or Part p Part 1 or Part of (Check | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 5000 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| USA Webcash Name USBA Webcash Number Street Chicago City LVNV FUNDING LLC Name PO BOX 740281 Number Street HOUSTON City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | Illinois State | 60610 Zip Code | On which entry in Line 4.7 Last 4 digits of a On which entry in | of (Check one): ccount number Part 1 or Part p Part 1 or Part of (Check | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 5000 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| Name USBA Webcash Number Street Chicago City LVNV FUNDING LLC Name PO BOX 740281 Number Street HOUSTON City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | State | Zip Code | Last 4 digits of a On which entry in | of (Check one): ccount number Part 1 or Part of (Check | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 5000 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| USBA Webcash Number Street Chicago City LVNV FUNDING LLC Name PO BOX 740281 Number Street HOUSTON City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | State | Zip Code | Last 4 digits of a On which entry in | of (Check one): ccount number Part 1 or Part of (Check | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 5000 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| Chicago City LVNV FUNDING LLC Name PO BOX 740281 Number Street HOUSTON City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | State | Zip Code | Last 4 digits of a | one): ccount number Part 1 or Part of (Check | Part 2: Creditors with Nonpriority Unsecured Claims 5000 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| Chicago City LVNV FUNDING LLC Name PO BOX 740281 Number Street HOUSTON City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | State | Zip Code | On which entry in | n Part 1 or Part | Claims 5000 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| City LVNV FUNDING LLC Name PO BOX 740281 Number Street HOUSTON City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | State | Zip Code | On which entry in | n Part 1 or Part | 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| PO BOX 740281 Number Street HOUSTON City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | Texas | | - | of (Check | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| Name PO BOX 740281 Number Street HOUSTON City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | | 77274 | - | of (Check | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| PO BOX 740281 Number Street HOUSTON City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | | 77274 | - | of (Check | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured |
| Number Street HOUSTON City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | | 77274 | Line 4.4 | | ✓ Part 2: Creditors with Nonpriority Unsecured |
| HOUSTON City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | | 77274 | | onej. | |
| City First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | | 77274 | | | Claims |
| First Bank of Delaware Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | State | | Last 4 digits of a | ccount number | 1880 |
| Name 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | | Zip Code | | | |
| 50 S 16th St Number Street Philadelphia City HOOGENDOORN & TAL | | | On which entry in | Part 1 or Part | 2 did you list the original creditor? |
| Number Street Philadelphia City HOOGENDOORN & TAL | | | - | | |
| Philadelphia City HOOGENDOORN & TAL | | | Line 4.4 | _of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| City HOOGENDOORN & TAL | | | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| HOOGENDOORN & TAL | Pennsylvania | 19102 | Last 4 digits of a | ccount number | 1880 |
| | State | Zip Code | | • | |
| Name | BOT LLP | | On which entry i | n Part 1 or Part | 2 did you list the original creditor? |
| 122 S MICHIGAN #122 | 0 | | Line 4.9 | of (Check | Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | | one): | Part 2: Creditors with Nonpriority Unsecured Claims |
| Chicago | Illinois | 60603 | Last 4 digits of a | ccount number | |
| City | State | Zip Code | | | |
| SHAPIRO WAYNE S | | | | - D | O did you list the evision to sell to 0 |
| Name | | | On which entry is | 1 Part 1 or Part | 2 did you list the original creditor? |
| 111 WEST WASHINGTO | N | | Line 4.15 | of (Check | Part 1: Creditors with Priority Unsecured Claims |
| Number Street | | | | one): | Part 2: Creditors with Nonpriority Unsecured |
| 01: | | | <u>—</u> | | Claims |
| Chicago City | Illinois State | 60602 Zip Code | Last 4 digits of a | ccount number | |

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Debtor 1 Charlene Brown Case number (if known)

| FIRST Na | me Middle Name Last Name | | | |
|--------------------------|---|---------|----------------------|---------|
| Part 4: Add t | ne Amounts for Each Type of Unsecured Claim | | | |
| | nmounts of certain types of unsecured claims. This information is nounts for each type of unsecured claim. | s for s | tatistical reporting |) purpo |
| | | | Total claims | |
| Total claims from Part 1 | 6a. Domestic support obligations. | 6a. | \$0.00 | |
| | 6b. Taxes and certain other debts you owe the government | 6b. | \$0.00 | |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$0.00 | |
| | 6d. Other. Add all other priority unsecured claims. Write that | 6d. | \$0.00 | |
| | amount here. 6e. Total. Add lines 6a through 6d. | 6e. | \$0.00 | |
| | ee. Total. Add lines oa through ed. | oe. | | |
| | | | Total claims | |
| Total claims from Part 2 | 6f. Student loans | 6f. | \$0.00 | |
| | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$0.00 | |
| | 6h. Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$0.00 | |
| | 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$37,451.58 | |
| | 6i Total Add lines 6f through 6i | 6i | \$37,451.58 | |

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| Fill in this infor | mation to identify your c | ase: | |
|---------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Charlene | | Brown |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number | | | |
| (If known) | | | |

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or compan | ny with whom you have | e the contract or lease | State what the contract or lease is for |
|-----|--------------------------|-----------------------|-------------------------|--|
| 2.1 | Brown, Priscilla Name | | | Residential Lease, Debtor is Lessee, Oral Monthly Lease with Debtor's Sister |
| | Number | Street | | |
| | City | State | Zip Code | |

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| | | Du | cument Pay | ye 32 01 09 |
|---------------------|----------------------------|---|---------------------------|--|
| Fill in this info | ormation to identify your | case: | | |
| Debtor 1 | Charlene | MILL III N | Brown | |
| Debtor 2 | First Name | Middle Name | Last Name | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court for the | e: Northern | District of Illinois | |
| Case number | r | | (State) | |
| (If known) | · | | | |
| | | | | Check if this is an amended filing |
| Otticial | L Corpo 106LI | | | arrended hing |
| Official | Form 106H | | | |
| Schedu | le H: Your Co | debtors | | 12/15 |
| Codobtoro or | o noonlo or ontitioo wh | a ara alaa liabla far any dal | eta vali may haya. Ba a | as complete and accurate as possible. If two married people are |
| the entries in | | , | | re space is needed, copy the Additional Page, fill it out, and number top of any Additional Pages, write your name and case number (if |
| 1. Do you l | have any codebtors? (If | you are filing a joint case, do | not list either spouse as | as a codebtor.) |
| ✓ No |) | | | |
| ☐ Ye | S | | | |
| | | u lived in a community pro exico, Puerto Rico, Texas, Wa | | ry? (Community property states and territories include Arizona, California, nsin.) |
| ✓ No | o. Go to line 3. | | | |
| Ye | s. Did your spouse, forn | ner spouse, or legal equiva | ent live with you at the | ne time? |
| | No | | | |
| | Yes. In which commun | nity state or territory did you | live? | Fill in the name and current address of that person. |
| | Name of your angue | , former spouse, or legal equi | valent | |
| | Name of your spouse | , former spouse, or legal equi | vaient | |
| | Number Street | | | |
| | City | State | Zip Co | Code |
| 3. In Colum | nn 1, list all of your cod | ebtors. Do not include your | spouse as a codebtor | or if your spouse is filing with you. List the person shown in line 2 |

again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D),

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 1: Your codebtor

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| | 20 | | . age ce | 0. 00 | |
|--|---|-------------------|-----------------|--------------|---|
| Fill in this information to ident | ify your case: | | | | |
| Debtor 1 Charlene | | Brown | | | |
| First Name | Middle Name | Last Na | ame | — Che | eck if this is: |
| Debtor 2 (Spouse, if filing) First Name | Middle Nove | L and Mi | | - - | An amended filing |
| (Spouse, Il IIIIII9) First Name | Middle Name | Last Na | | | • |
| United States Bankruptcy Court the: Case number | or <u>Northern</u> | District of Illin | nois tate) | | A supplement showing post-petition chapter 1 expenses as of the following date: |
| (lf known) | | | | _ | MM / DD / YYYY |
| Official Form 106 | | | | | |
| Schedule I: Your | ncome | | | | 12/1 |
| information about your spous | e. If you are separated and led, attach a separate she very question. | d your spous | e is not filing | with you, do | r spouse is living with you, include not include information about your ional pages, write your name and case |
| Fill in your employment information. | | Debtor 1 | | | Debtor 2 |
| | Employment status | ✓ Employ | ved | | Employed |
| If you have more than one job, attach a separate page with | | | nployed | | Not Employed |
| information about additional employers. | Occupation | | | | |
| Include part time, seasonal, or self-employed work. | Employer's name | Alternative | Staffing | | |
| | Employer's address | 5620 W Ce | ermak Rd | | |
| Occupation may include studer or homemaker, if it applies. | it | Number Stre | eet | | Number Street |
| | | Cicero | Illinois | 60804 | |
| | | City | State | Zip Code | City State Zip Code |
| | How long employed there? | 1 year 5 m | onths | | |
| Part 2: Give Details Abou | t Monthly Income | | | | |
| spouse unless you are separate | d. | - | | - | write \$0 in the space. Include your non-filing or that person on the lines below. If you need |
| more space, attach a separate s | | | | Debtor 1 | For Debtor 2 or non-filing spouse |
| | salary, and commissions (beforthly, calculate what the monthly | | 2. | \$1,593.32 | |
| 3. Estimate and list monthly of | overtime pay. | | 3. | + \$0.00 | |
| 4. Calculate gross income. Ad | dd line 2 + line 3. | | 4. | \$1,593.32 | |

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| Debtor 1Charlene | Brown | Case number (if | | |
|---|--|--------------------------|------------------------------------|-------------------------|
| First Name Middle Name | Last Name | known) | or Dobtor 2 or | |
| | | | or Debtor 2 or on-filing spouse | |
| Copy line 4 here | → 4. | \$1,593.32 | | |
| 5. List all payroll deductions: | ······································ | <u> </u> | | |
| 5a. Tax, Medicare, and Social Security deductions | 5a. | ¢206.40 | | |
| • | • | \$296.49 | | |
| 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | | |
| 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | | |
| 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | | |
| 5e. Insurance | 5e. | \$0.00 | | |
| 5f. Domestic support obligations | 5f. | \$0.00 | | |
| 5g. Union dues | 5g. | \$0.00 | | |
| 5h. Other deductions. Specify: | 5h. + | \$0.00 + | | |
| 6. Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5h$. | +5f + 5g 6. | \$296.49 | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from | line 4. 7. | \$1,296.84 | | |
| 8. List all other income regularly received: | | | | |
| 8a. Net income from rental property and from operating a business, profession, or farm | | | | |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, a | and | | | |
| the total monthly net income. | 8a. | \$0.00 | | |
| 8b. Interest and dividends | 8b. | \$0.00 | | |
| 8c. Family support payments that you, a non-filing spouse, dependent regularly receive | or a | | | |
| Include alimony, spousal support, child support, maintenan divorce settlement, and property settlement. | ce, 8c. | \$0.00 | | |
| 8d. Unemployment compensation | 8d. | \$0.00 | | |
| 8e. Social Security | 8e. | \$0.00 | | |
| 8f. Other government assistance that you regularly received Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefinder the Supplemental Nutrition Assistance Program) or housing subsidies Specify: | - | \$0.00 | | |
| 8g. Pension or retirement income | 8g. | \$0.00 | | |
| 8h. Other monthly income. Specify: | 8h. + | \$0.00 + | | |
| 9. Add all other income Add lines $8a + 8b + 8c + 8d + 8e + 8f + 8e + 8e$ | 3g + 8h. 9. | \$0.00 | | |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing | 10. g spouse | \$1,296.84 + | = | \$1,296.84 |
| 11. State all other regular contributions to the expenses that Include contributions from an unmarried partner, members of your friends or relatives. Do not include any amounts already included in lines 2-10 or an | our household, your d | ependents, your roommate | | |
| Specify: | | | 11. + | \$0.00 |
| 12. Add the amount in the last column of line 10 to the amount Write that amount on the Summary of Schedules and Statistical | | | | \$1,296.84 |
| | - | , | | Combined monthly income |
| 13. Do you expect an increase or decrease within the year aft No. | er you file this form? | | | |
| Yes. Explain: | | | | |

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| | | Doct | ument Page 35 of 6 | 9 | | |
|---------------------------------|--|---|--|-------------------------------------|-----------|------------------------------|
| Fill in this infor | mation to identify your | case: | | | | |
| Debtor 1 | Charlene | | Brown | | | |
| Dalatan | First Name | Middle Name | Last Name | Check if this is: | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | An amended filing | j | |
| United States E | Bankruptcy Court for the: | Northern | District of Illinois (State) | A supplement sho expenses as of the | | petition chapter 13 date: |
| Case number | | | (State) | MM / DD / YYYY | | |
| Official | Form 106J | | | , 25, 1111 | | |
| Schedul | e J: Your Exp | enses | | | | 12/15 |
| information. If (if known). Ans | | , attach another sheet to this | re filing together, both are equal s form. On the top of any addition | | | |
| 1. Is this a joi | nt case? | | | | | |
| No. Go | o to line 2 | | | | | |
| Yes. D | oes Debtor 2 live in a s | separate household? | | | | |
| | ■ No | | | | | |
| | _ | ile Official Forms 106,I-2 Expe | nses for Separate Household of Deb | tor 2 | | |
| 2 Do you hay | e dependents? | | Tees for coparate reasoners of 200 | | | |
| Do not list Debtor 2. | ebtor 1 and Y | es. Fill out this information for ach dependent | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does depo | endent live |
| | penses include | lo | | | | |
| than yourself and | | ′es | | | | |
| dependents | - | | | | | |
| Part 2: Esti | mate Your Ongoing | Monthly Expenses | | | | |
| _ | of a date after the bank | | you are using this form as a supp oplemental Schedule J, check th | - | | |
| | - | cash government assistance it on Schedule I: Your Income | • | | | Your expenses |
| | or home ownership expr the ground or lot. 4. | cpenses for your residence. In | nclude first mortgage payments and | | 4. | \$400.00 |
| If not incl | uded in line 4: | | | | | |
| 4a. Real e | state taxes | | | | 4a | \$0.00 |

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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 Debtor 1 First Name
 Charlene
 Brown
 Case number (if known)

 Last Name

| 5. Additional mortgage payments for your residence, such as home equity loans 6. Utilities: 6a. Electricity, heat, natural gas 6a. | Your expenses \$0.00 |
|---|----------------------|
| 6. Utilities: | |
| | |
| 6a. Electricity, heat, natural gas | |
| | \$0.00 |
| 6b. Water, sewer, garbage collection 6b. | \$0.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. | \$50.00 |
| 6d. Other. Specify: | \$0.00 |
| 7. Food and housekeeping supplies 7. | \$175.00 |
| 8. Childcare and children's education costs | \$0.00 |
| 9. Clothing, laundry, and dry cleaning | \$15.00 |
| 10. Personal care products and services | \$15.00 |
| 11. Medical and dental expenses | \$20.00 |
| 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments | \$75.00 |
| 13. Entertainment, clubs, recreation, newspapers, magazines, and books | \$0.00 |
| 14. Charitable contributions and religious donations 14. | \$0.00 |
| 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | |
| 15a. Life insurance | \$0.00 |
| 15b. Health insurance | \$0.00 |
| 15c. Vehicle insurance | \$100.00 |
| 15d. Other insurance. Specify: 15d | \$0.00 |
| 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. | |
| Specify: 16 | \$0.00 |
| 17. Installment or lease payments: | |
| 17a. Car payments for Vehicle 1 | \$440.00 |
| 17b. Car payments for Vehicle 2 | \$0.00 |
| 17c. Other. Specify: | \$0.00 |
| 17d. Other. Specify: | \$0.00 |
| 18. Your payments of alimony, maintenance, and support that you did not report as deducted from | \$0.00 |
| your pay on line 5, Schedule I, Your Income (Official Form 106I). | |
| 19. Other payments you make to support others who do not live with you. Specify: 19. | Ф0.00 |
| Specify: 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. | \$0.00 |
| 20a. Mortgages on other property 20a | \$0.00 |
| 20b. Real estate taxes. | \$0.00 |
| 20c. Property, homeowner's, or renter's insurance | \$0.00 |
| 20d. Maintenance, repair, and upkeep expenses. | \$0.00 |
| 20e. Homeowner's association or condominium dues | \$0.00 |

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| Debtor 1 | Charlene | | Brown | Case number (if known) | | |
|--|--------------------|---|-------------|------------------------|-----|------------|
| | First Name | Middle Name | Last Name | | | |
| 21. Othe | r. Specify: | | | | 21 | \$0.00 |
| 22 Calc | ulate your month | ilv eynenses | | | | |
| | Add lines 4 throug | • | | | | \$1,290.00 |
| | Copy line 22 (mon | | \$0.00 | | | |
| | , , | | \$1,290.00 | | | |
| | | 2b. The result is your monthly exp | Denses. | | 22. | |
| | ulate your month | • | | | | |
| 23a. (| Copy line 12 (your | combined monthly income) from | Schedule I. | | 23a | \$1,296.84 |
| 23b. Copy your monthly expenses from line 22 above. | | | | | 23b | \$1,290.00 |
| 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. | | | | | | \$6.84 |
| | | | | | 23c | |
| mort | | xpect to finish paying for your car ncrease or decrease because of a ere: | | | | |
| | | | | | | |

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| Fill in this infor | mation to identify your c | ase: | |
|------------------------|---------------------------|-------------|----------------------|
| Debtor 1 | Charlene | | Brown |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois |
| | | | (State) |
| Case number (If known) | | | |

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Par | t 1: Sign Below | |
|-----|--|---|
| | Did you pay or agree to pay someone who is NOT an attorney to | help you fill out bankruptcy forms? |
| | ✓ No | |
| | Yes. Name of person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| | Under penalty of perjury, I declare that I have read the summary that they are true and correct. | and schedules filed with this declaration and |
| × | /s/ Charlene Brown | × |
| | Signature of Debtor 1 | Signature of Debtor 2 |
| | Date 1/10/2017 MM/DD/YYYY | Date MM/DD/YYYY |
| | ואוואו/טט/ ז ז ז ז | ואוואושטייז ז ז ז |

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| Fill in this inf | formation to identify your | case: | | | | | |
|---------------------|--|-----------------------|---------------------------|----------------|-------------|----------|----------------------|
| Debtor 1 | Charlene | | Brown | | _ | | |
| Debtor 2 | First Name | Middle N | ame Last Nam | е | | | |
| (Spouse, if filing) | First Name | Middle N | ame Last Nam | е | = | | |
| United States | Bankruptcy Court for the: | Northern | District of Illino | | _ | | |
| Case numbe | er | | (Stat | e) | | | |
| (If known) | | | | | | | Check if this is a |
| Officia | l Form 107 | | | | | | amended filing |
| Statem | ent of Financia | al Δffaire f <i>c</i> | or Individuals | Filina fo | r Bankru | ntcv | 12/1 |
| | lete and accurate as po | | | | | | |
| information | . If more space is need | ed, attach a sepa | | | | | |
| number (if k | known). Answer every o | juestion. | | | | | |
| Part 1: Gi | ve Details About Your | Marital Status | and Where You Lived | Before | | | |
| 1. What | is your current marital st | atus? | | | | | |
| | 1arried | | | | | | |
| | ot married | | | | | | |
| 2. During | g the last 3 years, have y | ou lived anywhere | other than where you li | e now? | | | |
| | | ou liveu allywhere | other than where you in | re now: | | | |
| | o es. List all of the places y | ou lived in the last | 3 years. Do not include y | where vou live | now | | |
| Ш. | os. List all of the places y | | o yourd. Do not molado t | whole yearwe | now. | | |
| D | ebtor 1: | | Dates Debtor 1 lived | Debtor 2: | | | Dates Debtor 2 lived |
| | | | there | | | | there |
| | | | | Same a | as Debtor 1 | | Same as Debtor 1 |
| | | | | _ | | | _ |
| N | umber Street | | From | Number Str | reet | | From |
| | | | To | - | | | To |
| C | ity State | Zip Code | | City | State | Zip Code | |
| | | <u> </u> | | Same a | as Debtor 1 | | Same as Debtor 1 |
| | | | | _ | | | |
| N | umber Street | | From | Number Sti | reet | | From |
| _ | | | То | | | | To |
| <u></u> | ity State | Zip Code | | City | State | Zip Code | |
| | , | p | | , | Sidio | p 3000 | |
| | t he last 8 years, did you e <i>itories</i> include Arizona, Calif | | | | | | |
| ✓ No | | | | | | | |
| | s. Make sure you fill out S | chedule H: Your C | Codebtors (Official Form | 106H). | | | |

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Brown

Debtor 1 Charlene Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$291.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$13058.00 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$16002.00 For the calendar year before that: commissions, commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Gross income from Sources of income Sources of income Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 Est. LINK \$1,379.00 For the calendar year before that: (January 1 to December 31, 2015

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Debtor 1 Charlene Brown __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or

vendors
Other

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| tor ⁻ | 1 Charlene | | | Bro | own | Case number | (if known) |
|--------------------|---|--|--|---|--|---|--|
| | First Name | | Middle Name | Las | st Name | | |
| Insi cor age | iders include your porations of whic | relatives; a h you are a for a busin | any general partner an officer, director, ness you operate a | s; relatives of any person in control, | general partners; part or owner of 20% or | nerships of which y more of their voting | who was an insider? ou are a general partner; g securities; and any managing domestic support obligations, |
| ✓ | No | | | | | | |
| | Yes. List all pay | ments to | an insider. | _ | | | |
| | | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | Zip Code | | | | |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | | | | | | | |
| | City | State | Zip Code | | | | |
| | No | _ | aranteed or cosigne | • | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |
| | Insider's Name | | | | | | |
| | Number Street | | | | | | |
| | City | State | 7'- 01- | | | | |
| | | | Zip Code | | | | |
| | Insider's Name | | Zip Code | | · | | |
| | Insider's Name Number Street | | Zip Code | | | | |
| | | State | Zip Code | | | | |

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Debtor 1 Charlene Brown Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Joint Action Pending Cook County Circuit Court Court Name On appeal 50 West Washington Street Case number NumberStreet Concluded 2016-M1-717830 60602 Chicago Illinois City State Zip Code Case title Joint Action ✓ Pending Cook County Circuit Court Court Name On appeal 50 West Washington Street Case number NumberStreet Concluded 2016-M1-705098 Chicago Illinois 60602 City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Notice of Wage Assignment by Genesis Financial 12/20/2016 \$0 Genesis Financial & Payment Systems Illinois, LLC Creditor's Name Explain what happened 3175 Commercial Ave. Suite 201 Number Street Property was repossessed. Property was foreclosed. Northbrook 60062 Illinois Property was garnished. State Zip Code City Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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| Debt | tor 1 Charlene | Brown | Case number (if known) | |
|------|--|----------------------------|--|---------------------|
| | First Name Middle Name | Last Name | | |
| 11. | Within 90 days before you filed for bankruptcy, did accounts or refuse to make a payment because you No | | pank or financial institution, set off any amo | ounts from your |
| | Yes. Fill in the details. | | | |
| | | Describe the action th | e creditor took Date action was taken | Amount |
| | | | | |
| | Creditor's Name | | | |
| | Number Street | | | |
| | | Last 4 digits of account | number: XXXX- | |
| | | | | |
| | City State Zip Code | | | |
| | | | | |
| 12. | Within 1 year before you filed for bankruptcy, was a appointed receiver, a custodian, or another official? | | possession of an assignee for the benefit o | creditors, a court- |
| | ✓ No | | | |
| | Yes | | | |
| Part | 5: List Certain Gifts and Contributions | | | |
| | | | | |
| 13. | Within 2 years before you filed for bankruptcy, did y | ou give any gifts with a t | otal value of more than \$600 per person? | |
| | ✓ No | | | |
| | Yes. Fill in the details for each gift. | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | | | | |
| | Person to Whom You Gave the Gift | | | |
| | | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |
| | | | | |
| | Person to Whom You Gave the Gift | | | |
| | | | | |
| | N. ork or Object | | | |
| | Number Street | | | |
| | City State Zip Code | | | |
| | Person's relationship to you | | | |

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| ebtor 1 | Charlene | | Brown | Case number (if know | vn) | |
|----------|--|---|---|----------------------------|--------------------------|------------------------|
| | First Name | Middle Name | Last Name | | | |
| I. Wi | thin 2 years before you filed | for bankruptcy, did | I you give any gifts or contril | butions with a total value | of more than \$600 | to any charity? |
| _ | 1 No | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , | | • | , , , , |
| ¥ | J. | och gift or contributi | ion | | | |
| L | Yes. Fill in the details for ea | | | | _ | |
| | Gifts or contributions to cl that total more than \$600 | | Describe what you con | tributed | Date you contributed | Value |
| | that total more than \$000 | | | | Contributed | |
| | Charity's Name | | _ | | | - |
| | Criainty 5 Name | | | | | |
| | | | - | | | |
| | Number Street | | - | | | |
| | | | _ | | | |
| | City State | Zip Code | | | | |
| rt 6: | List Certain Losses | | | | | |
| ga ✓ | mbling? No Yes. Fill in the details. | | | | | · |
| | Describe the property you how the loss occurred | lost and | Describe any insurance include the amount that pending insurance claims | insurance has paid. List | Date of your loss | Value of property lost |
| | | | A/B: Property. | | | |
| | | | | | | |
| rt 7: | List Certain Payments of | r Transfore | | | | |
| ✓ | No Yes. Fill in the details. | | Description and value of transferred | of any property | Date payment or transfer | Amount of payment |
| | | | transierrea | | was made | payment |
| | Semrad Law Firm | | Attorney's Fee - 0.00 | | 1/10/2017 | \$0.00 |
| | Person Who Was Paid | | | | | |
| | 11101 S. Western Avenue Number Street | | - | | | |
| | | | | | | |
| | - | | - | | | |
| | Chicago Illinois City State | 60643 Zip Code | - | | | |
| | City State | Zip Code | | | | |
| | Email or website address | | - | | | |
| | None Person Who Made the Paym | ant if Nat Val | - | | | |
| | Person who Made the Paym | ent, if Not You | | | | |
| | Person Who Was Paid | | - | | | |
| | Person who was Paid | | | | | |
| | Number Street | | | | | |
| | | | _ | | | |
| | City State | Zip Code | · | | | |
| | | Zip Code | | | | |
| | Email or website address | Zip Code | - | | | |
| | Email or website address Person Who Made the Paym | | | | | |

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| Deb ¹ | or 1 | Charlene | | Brown | Case number (if known) | | |
|------------------|-------------|---|--|---|-----------------------------|---------------------------------------|------------------------------|
| | | First Name | Middle Name | Last Name | | | |
| 17. | hel Do | p you deal with your credi not include any payment or | tors or to make payme | | ur behalf pay or transfer | any property to anyo | one who promised to |
| | | No Yes. Fill in the details. | | | | | |
| | | | | Description and value of an transferred | y property | Date An payment or transfer was made | mount of payment |
| | | Person Who Was Paid | | | | | |
| | | Number Street | | | | | |
| | | City State | Zip Code | | | | |
| | the Incl | ordinary course of your b | usiness or financial af and transfers made as s | ecurity (such as the granting of a nent. | security interest or mortga | ge on your property). [| Do not include gifts |
| | | | | Description and value of an property transferred | | y property or ceived or debts paid | Date transfer was made |
| | | Person Who Received Tran | nsfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to yo | Zip Code ou | | | | |
| | | Person Who Received Tran | nsfer | | | | |
| | | Number Street | | | | | |
| | | City State Person's relationship to yo | Zip Code ou | | | | |
| 19. | ben | hin 10 years before you fil neficiary? ese are often called asset-pr No Yes. Fill in the details. | | you transfer any property to a | self-settled trust or sim | ilar device of which y | you are a |
| | _ | | | Description and value of t | he property transferred | | Date transfer was made |
| | | Name of trust | | | | | |

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Debtor 1 Charlene Brown Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was number instrument before closed, sold, closing or moved, or transfer transferred Chase Checking XXXX-9502 10/2016 \$ 0.00 Person Who Was Paid Savings Po Box 9001871 Number Street Money market Brokerage 40290 Louisville Kentucky Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Number Street City State Zip Code

City

State

Zip Code

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| | .01 1 | Charlene | | Brown | Casi | e number <i>(if known)</i> | |
|------|------------|---|--|--|---------------------|---|----------------|
| | | First Name Middle Name | Į | ast Name | | | |
| Part | 9: | Identify Property You Hold or Control | for Someon | ne Else | | | |
| | | | | | | | |
| 23. | | you hold or control any property that some | one else own | s? Include an | y property you be | orrowed from, are storing for, or hold in | trust for |
| | som | neone. | | | | | |
| | V | No | | | | | |
| | H | | | | | | |
| | Ш | Yes. Fill in the details. | | | | | |
| | | | Where is | the property? | | Describe the contents | Value |
| | | | | | | | |
| | | Owner's Name | NumberSt | reet | | | |
| | | Nivershau Church | | | | | |
| | | Number Street | | | | | |
| | | | City | State | Zip Code | | |
| | | | City | State | Zip Code | | |
| | | City State Zip Code | | | | | |
| | | • | | | | | |
| Part | 10: | Give Details About Environmental Inf | formation | | | | |
| _ | | | | | | | |
| For | the p | ourpose of Part 10, the following definitions app | oly: | | | | |
| | ■ <i>E</i> | nvironmental law means any federal, state, or lo | cal statute or | regulation con | cerning pollution, | contamination, releases of | |
| | | azardous or toxic substances, wastes, or mater | | | | | |
| | in | cluding statutes or regulations controlling the c | leanup of the | se substances, | wastes, or materi | ial. | |
| | ■ S | ite means any location, facility, or property as d | efined under a | ny environmer | ntal law, whether y | you now own, operate, or utilize it | |
| | 0 | r used to own, operate, or utilize it, including di | isposal sites. | | | | |
| | ■ <i>H</i> | lazardous material means anything an environm | nental law defir | nes as a hazam | dous waste hazar | dous substance | |
| | | oxic substance, hazardous material, pollutant, c | | | Jous Waste, Hazai | dous substance, | |
| | | | | | | | |
| | | | | | | | |
| Rep | ort al | Il notices, releases, and proceedings that you kr | now about, reç | gardless of wh | en they occurred. | | |
| Rep | ort al | Il notices, releases, and proceedings that you kn | now about, reç | gardless of wh | en they occurred. | | |
| Rep. | | Il notices, releases, and proceedings that you kn | | | | or in violation of an environmental law? | ? |
| | | s any governmental unit notified you that yo | | | | or in violation of an environmental law? | ? |
| | | s any governmental unit notified you that yo | | | | or in violation of an environmental law? | ? |
| | | s any governmental unit notified you that yo | | | | or in violation of an environmental law? | ? |
| | | s any governmental unit notified you that yo | | ole or potenti | | or in violation of an environmental law? Environmental law, if you know it | Date of |
| | | s any governmental unit notified you that yo | u may be liak | ole or potenti | | | |
| | | s any governmental unit notified you that yo No Yes. Fill in the details. | u may be liab | ole or potenti | | | Date of |
| | | s any governmental unit notified you that yo | u may be liak | ole or potenti | | | Date of |
| | | No Yes. Fill in the details. Name of site | Governme | ole or potentia | | | Date of |
| | | s any governmental unit notified you that yo No Yes. Fill in the details. | u may be liab | ole or potentia | | | Date of |
| | | No Yes. Fill in the details. Name of site | Governme Governme NumberSt | ental unit | ally liable under | | Date of |
| | | No Yes. Fill in the details. Name of site | Governme | ole or potentia | | | Date of |
| | | No Yes. Fill in the details. Name of site | Governme Governme NumberSt | ental unit | ally liable under | | Date of |
| | | No Yes. Fill in the details. Name of site Number Street | Governme Governme NumberSt | ental unit | ally liable under | | Date of |
| 24. | Hass | No Yes. Fill in the details. Name of site Number Street | Governme Governme NumberSt | ental unit ntal unit reet State | Zip Code | | Date of |
| 24. | Hav | No Yes. Fill in the details. Name of site Number Street City State Zip Code | Governme Governme NumberSt | ental unit ntal unit reet State | Zip Code | | Date of |
| 24. | Hass | No Yes. Fill in the details. Name of site Number Street City State Zip Code re you notified any governmental unit of any | Governme Governme NumberSt | ental unit ntal unit reet State | Zip Code | | Date of |
| 24. | Hav | No Yes. Fill in the details. Name of site Number Street City State Zip Code | Governme Governme NumberSt | ental unit ntal unit reet State | Zip Code | | Date of |
| 24. | Hav | No Yes. Fill in the details. Name of site Number Street City State Zip Code re you notified any governmental unit of any | Governme Governme NumberSt | ental unit reet State | Zip Code | | Date of |
| 24. | Hav | No Yes. Fill in the details. Name of site Number Street City State Zip Code re you notified any governmental unit of any | Governme Governme NumberSti City | ental unit reet State | Zip Code | Environmental law, if you know it | Date of notice |
| 24. | Hav | No No Yes. Fill in the details. Name of site Number Street City State Zip Code re you notified any governmental unit of any No Yes. Fill in the details. | Governme Governme NumberStr City release of harmonic contents of the conte | ental unit reet State azardous mat | Zip Code | Environmental law, if you know it | Date of notice |
| 24. | Hav | No Yes. Fill in the details. Name of site Number Street City State Zip Code re you notified any governmental unit of any | Governme Governme NumberSti City | ental unit reet State azardous mat | Zip Code | Environmental law, if you know it | Date of notice |
| 24. | Hav | No Yes. Fill in the details. Name of site Number Street City State Zip Code re you notified any governmental unit of any No Yes. Fill in the details. | Government Government Government City Government Government | ental unit reet State azardous mate ental unit | Zip Code | Environmental law, if you know it | Date of notice |
| 24. | Hav | No No Yes. Fill in the details. Name of site Number Street City State Zip Code re you notified any governmental unit of any No Yes. Fill in the details. | Governme Governme NumberStr City release of harmonic contents of the conte | ental unit reet State azardous mate ental unit | Zip Code | Environmental law, if you know it | Date of notice |
| 24. | Hav | No Yes. Fill in the details. Name of site Number Street City State Zip Code re you notified any governmental unit of any No Yes. Fill in the details. | Government Government NumberSti City Government Government Government NumberSti | ental unit reet State azardous mat ental unit reet | Zip Code | Environmental law, if you know it | Date of notice |
| 24. | Hav | No Yes. Fill in the details. Name of site Number Street City State Zip Code re you notified any governmental unit of any No Yes. Fill in the details. | Government Government Government City Government Government | ental unit reet State azardous mate ental unit | Zip Code | Environmental law, if you know it | Date of notice |

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| Debt | tor 1 | Charlene | | | Bro | wn | Case | e number <i>(ii</i> | f known) | | |
|------|----------------|----------------------|-----------------|--------------------|---------------|-------------|---------------------|---------------------|--------------|----------------|----------------------------------|
| | | First Name | | Middle Name | Last | Name | | | | | |
| 26. | | e you been a part | y in any judio | cial or administ | rative procee | ding under | any environmen | tal law? In | clude settle | ments and or | ders. |
| | 뵘 | Yes. Fill in the def | tails. | | | | | | | | |
| | ш | | | | Court or age | ncy | | Nature (| of the case | | Status of the |
| | | | | | | - | | | | | case |
| | | Case title | | | | | | | | | Pending |
| | | | | | Court Name | | | | | | On appeal |
| | | Case number | | | NumberStreet | t | | | | | |
| | | | | | City | State | Zip Code | | | | Concluded |
| | | la: - | | | | | • | | | | |
| Part | 8111: | Give Details Al | oout Your E | Business or C | onnections | to Any Bu | siness | | | | |
| 27. | Witl | nin 4 years before | you filed for | bankruptcy, di | d you own a b | ousiness or | have any of the f | following c | onnections t | to any busine | ss? |
| | | ☐ A sole propri | ietor or self-e | emploved in a tr | ade professi | on or other | activity, either fu | ıll-time or r | nart-time | | |
| | | | | bility company (| - | | - | an un 10 Or p | Jan Currio | | |
| | | A partner in a | | | | aa.oty po | | | | | |
| | | | - | anaging executi | ve of a corpo | ration | | | | | |
| | | _ | | of the voting or | | | ooration | | | | |
| | | _ | | _ | | | | | | | |
| | $ \checkmark $ | No. None of the a | | | | | | | | | |
| | | Yes. Check all the | at apply abo | ve and fill in the | | | | | | | |
| | | | | | Descri | be the natu | ire of the busine | SS | | | number Do not number or ITIN. |
| | | | | | | | | | | cial Security | number of Trine. |
| | | Business Name | | | | | | | EIN: | | |
| | | Number Street | | | | | | | Dates husi | iness existed | |
| | | Number Street | | | Name | of account | ant or bookkeep | er | Dates Dusi | ilicos cxisteu | |
| | | City | State | Zip Code | _ | | | | From | То | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | Descri | be the natu | re of the busine | SS | Employer | Identification | number Do not |
| | | | | | 2000 | | | | | | number or ITIN. |
| | | Business Name | | | | | | | EIN: | | |
| | | business name | | | | | | | | | |
| | | Number Street | | | | | | | Dates busi | iness existed | |
| | | | | | Name | of account | ant or bookkeep | er | | | |
| | | City | State | Zip Code | | | | | From | To | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | Descri | be the natu | re of the busine | ss | | | number Do not |
| | | | | | | | | | include So | cial Security | number or ITIN. |
| | | Business Name | | | _ | | | | EIN: | | |
| | | | | | | | | | | | |
| | | Number Street | <u> </u> | | - N1 | -6 • | ant an beed to | | Dates busi | iness existed | |
| | | City | State | Zip Code | mame | or account | ant or bookkeep | er | F | τ. | |
| | | Oity | Gidit | Հ.p ooue | | | | | rrom | To | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

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| Deb | tor 1 Charlene | | | Brown | Case number (if known) |
|------|--------------------------------|--------------------------------------|---------------------------|-------------------------------|---|
| | First Name | | Middle Name | Last Name | |
| 28. | | rs before you file other parties. | ed for bankruptcy, did yo | ou give a financial stateme | nt to anyone about your business? Include all financial institutions, |
| | ✓ No Yes. Fill | in the details be | ow. | | |
| | | | | Date issued | |
| | Name | | | MM/DD/YYYY | |
| | Numbe | Street | | _ | |
| | City | State | e Zip Code | _ | |
| Part | 12: Sign B | elow | | | |
| t | true and corre a bankruptcy | ct. I understand case can result | that making a false sta | tement, concealing proper | ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | 3 | s/ Charler | e Brown | | × |
| | | Signature of D | ebtor 1 | | Signature of Debtor 2 |
| | | Date 1/10/20 | 17 | | Date |
| | Did you attach | additional pag | es to Your Statement of | Financial Affairs for Individ | luals Filing for Bankruptcy (Official Form 107)? |
|] | ✓ No Yes | | | | |
| Г | Did you pay or | agree to pay so | meone who is not an at | torney to help you fill out b | ankruptcy forms? |
| [| ✓ No | | | | |
| Ī | Yes. Name | of person | | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |

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| Debtor 1 | Charlene First Name | Middle Name | Brown Last Name | | Case number (if known) | | |
|----------|----------------------------------|-------------------------|----------------------|---------------------------------|------------------------|-------------------|--------------------|
| | Additional Page | Middle Name | Last Name | | | | |
| 9.Within | 1 year before you filed for bank | ruptcy, were you a part | y in any lawsuit, co | urt action, or | administra | itive proceedin | g? |
| | | Nature of th | e case | Court or age | ncy | | Status of the case |
| | Case title | Joint Action | | Cook County Court Name | Circuit Cour | t | Pending |
| | Case number | | | 50 West Washington Street | | | On appeal |
| | 2016-M1-702358 | | | NumberStreet Chicago City | Illinois State | 60602 Zip Code | Concluded |

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| Fill in this information to identify your case: | | | | |
|---|---------------------------|-------------|------------------------------|--|
| Debtor 1 | Charlene | | Brown | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States E | Sankruptcy Court for the: | Northern | District of Illinois (State) | |
| Case number (If known) | | | (Ciaio) | |

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Did you claim the property Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: BRIDGECREST CREDIT Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 2007 Nissan Altima: REAFFIRM Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

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| Debto | r Charlene | | Brown | Case number (if | |
|---------|------------------------------|----------------------------|------------------------|---|---|
| 1 | First Name | Middle Name | Last Name | known) | |
| Part 2: | List Your Unexpire | ed Personal Property Lease | es | | |
| informa | ation below. Do not list | | leases are leases that | ry Contracts and Unexpired Leases (Official Form 106G), fill in the tare still in effect; the lease period has not yet ended. You may 1 U.S.C. § 365(p)(2). | е |
| De | escribe your unexpired | personal property leases | | Will the lease be assumed? | |
| Le | ssor's name: | | | No Yes | |
| | scription of leased operty: | | | | |
| Le | ssor's name: | | | □ No □ Yes | |
| | scription of leased operty: | | | | |
| Le | ssor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | | |
| Le | ssor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | | |
| Le | ssor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | | |
| Le | ssor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | _ | |
| Le | ssor's name: | | | □ No □ Yes | |
| | escription of leased operty: | | | _ | |
| Part 3: | Sign Below | | | | |
| Und | | | my intention about any | property of my estate that secures a debt and any personal | |
| × | /s/ Charlene Brown | | × | | |
| _ | Signature of Debtor 1 | | _ | gnature of Debtor 1 | |
| С | Date 1/10/2017 MM/DD/YYYY | | Da | ate | |

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re | Charlene Brown | | | Case No. | |
|-------|---|-------------------------|------------------------------|----------------------|------------------------------|
| _ | Debtor | | | | (If known) |
| | | | | Chapter | Chapter 7 |
| | DISCLOSURE OF C | OMPEN | SATION OF AT | TORNEY F | OR DEBTOR |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. compensation paid to me within one year rendered or to be rendered on behalf of | ar before the fi | ling of the petition in bank | ruptcy, or agreed to | be paid to me, for services |
| | For legal services, I have agreed to accept | ot | | | \$1,465.00 |
| | Prior to the filing of this statement I hav | e received | | | \$0.00 |
| | Balance Due | | | | \$1,465.00 |
| 2. | The source of the compensation paid to | me was: | | | |
| | ✓ Debtor | Oth | er (specify) | | |
| 3. | The source of the compensation paid to | me is: | | | |
| | ✓ Debtor | Oth | er (specify) | | |
| 4. | I have not agreed to share the above members and associates of my law | e-disclosed co firm. | mpensation with any othe | r person unless the | y are |
| | I have agreed to share the above-dismembers or associates of my law fir the people sharing in the compensa | m. A copy of t | he agreement, together wi | | |
| 5. | In return for the above-disclosed fee, I h a. Analysis of the debtor's financia bankruptcy; | | | | |
| | b. Preparation and filing of any pet | ition, schedule | es, statements of affairs an | d plan which may b | pe required; |
| | c. Representation of the debtor at t | he meeting of | creditors and confirmation | n hearing, and any a | adjourned hearings thereof; |
| 6. | By agreement with the debtor(s), the abo | ove-disclosed | fee does not include the fo | ollowing services: | |
| | | | | | |
| | | | CERTIFICATION | | |
| | certify that the foregoing is a complete stor(s) in this bankruptcy proceedings. | tatement of an | y agreement or arrangeme | ent for payment to m | ne for representation of the |
| | 1/10/2017 | | /s/ Mor | sheda Hashem | |
| | Date | | Signat | ure of Attorney | |
| | | | Sem | rad Law Firm | |
| | | | Nam | e of law firm | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

| | \$245 | filing fee |
|---|-------|--------------------|
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

| | \$1,167 | filing fee |
|---|---------|--------------------|
| + | \$550 | administrative fee |
| | \$1,717 | total fee |

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$275 | total fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$200 | filing fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total foo |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Brown, Charlene Debtor(s) | Case No | |
|-----------------|--|---|--------------------------------------|
| | | Chapter. | Chapter7 |
| | VERIFIC | CATION OF CREDITOR MAT | TRIX |
| Ti knowledge | he above named Debtors hereby verify e. | that the attached list of creditors is tr | rue and correct to the best of their |
| Date: | 1/10/2017 | /s/ Brown, Charl Brown, Charlene Signature of Det | е |

BRIDGECREST CREDIT 4020 E INDIAN SCHOOL RD PHOENIX , 85018

GREATLAKESF Po Box 13489 Chicago , 60613

CCI 501 Greene Street # 302 Augusta , 30901

FIRST PREMIER BANK c/o Jefferson Capital Systems LLC PO Box 7999 c/o Linda Dold Saint Cloud, 56302

FST PREMIER 3820 N LOUISE AVE SIOUX FALLS, 57107

TRIDENT ASSET MANAGEMENT 53 PERIMETER CTR E STE 4 ATLANTA , 30346

Elite Rentals Chicago LLC Po Box 208661 Chicago , 60620

ASH ANOS FREEDMAN & LOGAN 77 W Washington St Ste 1211 Chicago , 60602

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park, 60181

USA Webcash USBA Webcash Chicago , 60610

Genesis Financial & Payment Systems Illinois, LLC 3175 Commercial Ave. Suite 201 Northbrook , 60062

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First National Collection Bureau, Inc 610 Waltham Way Sparks, 89434

LVNV FUNDING LLC PO BOX 740281 HOUSTON, 77274

First Bank of Delaware 50 S 16th St Suite 2300 Philadelphia , 19102

iSpeedy Loan 880 Lee St Ste 302 Des Plaines , 60016

Majestic Lake Financial Inc 635 East Highway 20 # K Upper Lake , 95485

Money Messiah P.O. Box 1469 Kahnawake , USA

Northcash - Northstar Finance LLC Po Box 498 Hays , 59527

Homes Renewal LLC 122 S MICHIGAN #1220 Chicago , 60603

HOOGENDOORN & TALBOT LLP 122 S MICHIGAN #1220 Chicago , 60603

Village Green 860 N Dewitt Pl Chicago , 60611

SHAPIRO WAYNE S 111 WEST WASHINGTON Chicago , 60602

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,465.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

| Date: (| 01/10/2017 | |
|---------|----------------|--------|
| Client | Charlene Brown | Client |
| Attorn | ey Mahida Hale | |

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| Debtor 1 Charlene First Name | | Brown | Case number (if known) | |
|---|--|---|--|--|
| | uestions for Reporting Purposes | ast Name | | |
| 16. What kind of debts do you have? | 16a. Are your debts primarily a "incurred by an individual No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily I money for a business or in No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you | consumer debts? Con primarily for a persona business debts? Busin evestment or through the | I, family, or household puness debts are debts that he operation of the busine | you incurred to obtain ess or investment. |
| 17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | ☐ No. | 7. Do you estimate that at | fter any exempt property is a istribute to unsecured credit | excluded and administrative tors? |
| 18. How many creditors do you estimate that you owe? | ✓ 1-49☐ 50-99☐ 100-199☐ 200-999 | 1,000-5,000 5,001-10,000 10,001-25,00 | 5 🗖 | 5,001-50,000 0,001-100,000 fore than 100,000 |
| 19. How much do you estimate your assets to be worth? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$ \$10,000,001- \$50,000,001- \$100,000,001 | \$50 million \$ \$ \$ \$ \$ \$ \$ | 500,000,001-\$1 billion 1,000,000,001-\$10 billion 10,000,000,001-\$50 billion lore than \$50 billion |
| 20. How much do you estimate your liabilities to be? | \$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million | \$1,000,001-\$ \$10,000,001-\$ \$50,000,001-\$ \$100,000,001 | \$50 million \$ | 500,000,001-\$1 billion 1,000,000,001-\$10 billion 10,000,000,001-\$50 billion lore than \$50 billion |
| Part 7: Sign Below | I have exemined this notition are | 11 -11 1 | | |
| | I have examined this petition, and I declare under penalty of perjury that the information provided is true an correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me firm out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. | | | |
| | /s/ Charlene Brown | verie Ericumi | Signature of Debtor 2 | |
| ### CECUM##\$70000075990000746################################# | Executed on 1/10/2017 MM / DD / Y | YYYY | Executed on | IM / DD / YYYY |

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| Fill in this infor | mation to identify you | ur case: | | | |
|---------------------------------|--------------------------|--------------------------------|---|---|--|
| Debtor 1 | Charlene | | Brown | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | l and blane a | | |
| | | | Last Name | | |
| United States E | Bankruptcy Court for the | ne: Northern | District of Illinois | | |
| Case number | | | (State) | | |
| (If known) | | | | | |
| Official | Form 106E |)oc | | | Check if this is an amended filing |
| Official | OIIII TOOL | | • | • | unionaea ming |
| Declarati | ion About a | n Individual Debto | or's Schedule | s | 12/1 |
| f two married | people are filing tog | ether, both are equally respon | sible for supplying corre | et information, | |
| | | | | | |
| money or prope | erty by fraud in conn | ection with a bankruptcy case | r amended schedules. N can result in fines up to | Making a false statement, concealing pro \$250,000, or imprisonment for up to 20 | perty, or obtaining vears, or both, 18 |
| U.S.C. §§ 152, 1 | 1341, 1519, and 357 | 1. | · | . , , , | , |
| Part 1: Sign | Below | | | | |
| Haltin Olgii | DCIOW | | | | |
| Did you pa | ay or agree to pay so | meone who is NOT an attorne | y to help you fill out ban | kruptcy forms? | |
| √ No | | | | | |
| L | | | | | |
| Yes. N | lame of person | | Attach Bankruptcy Signature (Official I | Petition Preparer's Notice, Declaration, and | |
| - | | | Ograda (Ornola 1 | <i>5111 1 1 3 1</i> | |
| | | | | | |
| | | | | | |
| | | | | | |
| Under pen | alty of perjury, I dec | lare that I have read the sumn | nary and schedules filed | with this declaration and | |
| that they a | are true and correct | • | | | |
| 🗴 /s/ Charle | ene Brown MW | Vene Brown | × | | |

Signature of Debtor 2

MM/DD/YYYY

Signature of Debtor 1

Date 1/10/2017 MM/DD/YYYY

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| Debtor 1 | | | Brown | Case number (if known) |
|---|--|--|--|---|
| (· · · · · · · · · · · · · · · · · · · | First Name | Middle Name | Last Name | |
| crec | nin 2 years before yo fitors, or other partio No Yes. Fill in the details | 9 S. | ou give a financial state | ment to anyone about your business? Include all financial institutions, |
| L | | | Date issued | |
| | | | Date Issued | |
| | Name | | MM/DD/YYYY | _ |
| | Number Street | | · | |
| | Number Street | | | |
| | City | State Zip Code | | |
| | · | 2.p 0000 | | |
| Part 12: | Sign Below | | | |
| a bank | xruptcy case can res | sult in fines up to \$250,000, ariene Brown LHCULIO | itement, concealing proj or imprisonment for up t LE Brown | perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. |
| | Signature | of Debtor 1 | | Signature of Debtor 2 |
| | Date 1/10 |)/2017 | | Date |
| | | | | |
| Did yo | u attach additional p | pages to Your Statement of | Financial Affairs for Indi | viduals Filing for Bankruptcy (Official Form 107)? |
| ☑ No |) | | | |
| Ye | s | | | |
| | | | | |
| Did you | u pay or agree to pay | y someone who is not an at | torney to help you fill ou | t bankruptcy forms? |
| Did you | | y someone who is not an at | torney to help you fill ou | t bankruptcy forms? |

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| Debtor Charlene | | Brown | Case number (if | |
|---|--|---|--|--|
| 1 First Name | Middle Name | Last Name | known) | |
| art 2: List Your Unexpired | Personal Property Leas | es | | |
| For any unexpired personal prop | perty lease that you listed in | Schedule G: Executory | Contracts and Unexpired Leases (Official Form 106G), are still in effect; the lease period has not yet ended. YU.S.C. § 365(p)(2). | fill in the 'ou may |
| Describe your unexpired per | sonal property leases | | Will the lease be assumed? | |
| Lessor's name: | | | □ No □ Yes | |
| Description of leased property: | miller in de fan de fan de wede omste de weste werde werde de fan de | тите и общения на поверждения в под предоставления на под | filliammer manamana Areka ka veri mana amari i Friend N.C.; a gyro | |
| Lessor's name: | | S S S S S S S S S S S S S S S S S S S | ☐ No ☐ Yes | and the second depart of company and a specific second to the second second second second second second second |
| Description of leased property: | | | | |
| Lessor's name: | | | ☐ No ☐ Yes | Mi da i a sa an ar ar an ar ann ann an ann an ann an |
| Description of leased property: | | | | |
| Lessor's name: | | | ☐ No ☐ Yes | A-1 |
| Description of leased property: | | | hand . | |
| Lessor's name: | | | ☐ No ☐ Yes | eksplanninger i milye (fredjeljenter e messenningere kolonie kolonie |
| Description of leased property: | | | | |
| Lessor's name: | | | □ No □ Yes | |
| Description of leased property: | | | | |
| Lessor's name: | | | □ No □ Yes | |
| Description of leased property: | | | | |
| rt 3: Sign Below | s materials in the contract of | en e | | . 1 % |
| Under penalty of perjury, I dec property that is subject to an u | lare that I have indicated manager in the indi | ny intention about any p | roperty of my estate that secures a debt and any perso | onal |
| ★ /s/ Charlene Brown ② Signature of Debtor 1 | Wene Brown | ★ Signa | ature of Debtor 1 | |
| Date 1/10/2017 MM/DD/YYYY | | Date | MM/DD/YYYY | |

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re: | Brown, Charlene | Case No | | | |
|-------------------|-------------------------------------|---|--|--|--|
| | Debtor(s) | Case No. | Case No. | | |
| | | Chapter. | Chapter7 | | |
| | VERIFIC | ATION OF CREDITOR MAT | TRIX | | |
| The knowledge. | e above named Debtors hereby verify | that the attached list of creditors is to | ttached list of creditors is true and correct to the best of their | | |
| · Date: | 1/10/2017 | /s/ Brown, Char | tene Marlene Brown | | |
| | • | Brown, Charlene | e | | |

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| Debtor 1 Charlene First Name Middle N | Brown | Case number (if known) | |
|---|---|--|--|
| | lame Last Name | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse |
| Unemployment compensation Do not enter the amount if you contend that the under the Social Security Act. Instead, list it here. | ne amount received was a benefi e: ↓ | \$ <u>0.00</u> | · |
| For your For your spouse | \$0.00 \$0.00 | | |
| Pension or retirement income. Do not include benefit under the Social Security Act. | de any amount received that was | s a \$ <u>0.00</u> | |
| 10. Income from all other sources not listed a amount. Do not include any benefits received a payments received as a victim of a war crime, a international or domestic terrorism. If necessary page and put the total below. | Inder the Social Security Act or crime against humanity, or | Ð | |
| | | | |
| Total amounts from separate pages, if any. | | + <u>\$0.00</u> | + |
| 11. Calculate your total current monthly inco | - | \$ <u>1,425.67</u> + | = \$1,425.67 |
| column. Then add the total for Column A to | the total for Column B. | | |
| Part 2: Determine Whether the Means To | act Applies to Very | | Total current monthly income |
| Part 2: Determine Whether the Means To 12. Calculate your current monthly income for | | | |
| 12a. Copy your total current monthly income for | | Copy line | 11 here → \$1,425.67 |
| Multiply by 12 (the number of months in | a year). | ,, | X 12 |
| 12b. The result is your annual income for this p | art of the form. | | 12b. <u>\$17,108.04</u> |
| 13 Calculate the median family income that ap | plies to you. Follow these steps | s: | |
| Fill in the state in which you live. | Illinois | MAN MA MAN MAN MAN MAN MAN MAN MAN MAN M | |
| Fill in the number of people in your household. | T | e vezigi in | |
| Fill in the median family income for your state ar household. | nd size of | • | 13. \$50,133.00 |
| To find a list of applicable median income amou instructions for this form. This list may also be a | nts, go online using the link spe | ecified in the separate | |
| 14. How do the lines compare? | valuable at the bankingtey clerk's | o office. | |
| 14a. Line 12b is less than or equal to line 1. Go to Part 3. | 3. On the top of page 1, check t | box 1, There is no presumption of abu | se. |
| 14b. Line 12b is more than line 13. On the Go to Part 3 and fill out Form 122A-2. | top of page 1, check box 2, The | e presumption of abuse is determined i | py Form 122A-2. |
| Part 3: Sign Below | | | |
| | | | |
| By signing here, I declare under penalty of perju | ry that the information on this s | statement and in any attachments is tru | e and correct. |
| * /s/ Charlene Brown Nevlene A | Brosun . | × | |
| Signature of Debtor 1 | | Signature of Debtor 2 | |
| Date 1/10/2017 MM/DD/YYYY | | Date 1/10/2017 MM/DD/YYYY | |
| If you checked line 14a, do NOT fill out or file If you checked line 14b, fill out Form 122A-2 | Form 122A-2. and file it with this form. | | |